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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on	Lisa	
your government-issued picture identification (for example, your driver's	First name	First name
license or passport).	Middle name	Middle name
Bring your picture	Bolano Burns	
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years		
Include your married or maiden names.		
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1141	
	Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Bolano Burns Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  xxx-xx-1141

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Case number (if known)

Debtor 1 Lisa Bolano Burns

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	834 Pheasant Walk Drive	If Debtor 2 lives at a different address:
		Schaumburg, IL 60193-3954  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Lisa Bolano Burns

ar	Tell the Court About	Your B	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> f page 1 and check the appropria	r 11 U.S.C. § 342(b) for Individuals Filing for Bani te box.	kruptcy		
	choosing to file under	■ Chapter 7							
		□с	hapter 11						
		□с	hapter 12						
		□с	hapter 13						
3.	How you will pay the fee		about how yo	u may pay. Туր attorney is sub	pically, if you are paying the fee y	ck with the clerk's office in your local court for mo ourself, you may pay with cash, cashier's check, half, your attorney may pay with a credit card or c	or money		
					tallments. If you choose this opt ts (Official Form 103A).	on, sign and attach the Application for Individual	s to Pay		
			I request tha	t my fee be wa	aived (You may request this option	on only if you are filing for Chapter 7. By law, a ju			
			applies to you	ır family size aı	nd you are unable to pay the fee	our income is less than 150% of the official pover in installments). If you choose this option, you mu			
			the Application	n to Have the (	Chapter / Filing Fee Waived (Off	cial Form 103B) and file it with your petition.			
).	Have you filed for bankruptcy within the	■ No	<b>)</b> .						
	last 8 years?	□ Ye	∋s.						
			District		When	Case number			
			District		When	Case number			
			District	-	When	Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is	□ Ye							
	not filing this case with you, or by a business partner, or by an affiliate?		70.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District	-	When	Case number, if known			
11.	Do you rent your residence?	■ No	Go to li	ine 12.					
		□Y€	<sub>es.</sub> Has yo	ur landlord obta	ained an eviction judgment again	st you and do you want to stay in your residence	?		
				No. Go to line	12.				
				Yes. Fill out Inbankruptcy pe		Judgment Against You (Form 101A) and file it w	ith this		

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Document Page 4 of 64 Case number (if known) Debtor 1 Lisa Bolano Burns Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to

public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Lisa Bolano Burns

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 64 Case number (if known) Debtor 1 Lisa Bolano Burns Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Lisa Bolano Burns Signature of Debtor 2 Lisa Bolano Burns Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on August 30, 2017

MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph P. Doyle	Date	August 30, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Joseph P. Doyle		
Printed name		
Law Office of Joseph P. Doyle LLC Firm name		
105 S. Roselle Road, Suite 203 Schaumburg, IL 60193		
Number, Street, City, State & ZIP Code		
Contact phone <b>847-985-1100</b>	Email address	joe@fightbills.com
6277393		
Bar number & State		

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Fill in this inform	mation to identify your	case:		
Debtor 1	Lisa Bolano Burn	s		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case number _				☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

			issets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	320,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,771.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	340,771.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	291,374.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	201,226.21
	Your total liabilities	\$	492,600.21
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,205.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,182.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,649.64 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	171,627.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	171,627.00

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Fill	in this infor	mation to identify ye	our case and t							
Deb	otor 1	Lisa Bolano B	urns							
		First Name	Midd	lle Name		Last Name				
	otor 2 use, if filing)	First Name	Midd	lle Name		Last Name				
			NODTUE	DN DICTO		IOIS				
Uni	ted States Ba	ankruptcy Court for th	ie: NORTHE	KN DISTR	RICT OF ILLIN	1015				
Cas	se number					-		[		neck if this is an nended filing
		orm 106A/B le <b>A/B: Pr</b> o	nertv							12/15
hink nfor Ansv	t it fits best. E mation. If mon ver every que	Be as complete and ac- re space is needed, att stion.	curate as possik ach a separate s	ble. If two n sheet to thi	narried people is form. On the	n asset fits in more than one are filing together, both are top of any additional pages n or Have an Interest In	equally responsib	le for sup	plying	correct
. <b>D</b>	o you own or	have any legal or equi	table interest in	any reside	nce, building,	land, or similar property?				
	No. Go to Pa	rt 2.								
	Yes. Where	is the property?								
1.1				What i	s the property	? Check all that apply				
		sant Walk Drive	-4:		Single-family h	ome	Do not deduct se			
	Street address	, if available, or other descrip	puon		Duplex or mult	<del>-</del>	the amount of an Creditors Who H			
					Condominium	or cooperative				
					Manufactured	or mobile home	Current value of	f the	Currer	nt value of the
	Schaumb	ourg IL	60193-3954		Land		entire property?	•		n you own?
	City	State	ZIP Code		Investment pro	pperty	\$320,00	00.00		\$320,000.00
				_	Timeshare Other		Describe the na			
				_		in the property? Check one	a life estate), if l		icy by	the entireties, or
				_	Debtor 1 only	The property Chook one	Fee simple			
	Cook				Debtor 2 only					
	County				Debtor 1 and [	Debtor 2 only	☐ Check if thi	e ie comm	unity r	roperty
					At least one of	the debtors and another	(see instructio		iuiiity į	лоренту
					information yo	ou wish to add about this iten	n, such as local			
				Debto appro home	or purchas aised for \$3 e to be wor	ed her home in June 20 310,000.00 at the time of th around \$300,000.00 to be worth from \$263	of purchase. C to \$320,000.00	Debtor e D. On-Li	stima	tes her

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$320,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Case number (if known) Document Debtor 1 Lisa Bolano Burns 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$3,000.00 Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Miscellaneous Costume Jewelry \$500.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5.750.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash on Hand \$50.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Checking account with Bank of America** 17.1. \$1,121.00 Checking account with PNC \$50.00 17.2. Checking account with BMO Harris \$25.00 17.3.

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Deb	tor 1	Lisa Bolano	Burns		Document	Page 13 of 64 Case number (if known)	
18. I		, <b>mutual funds</b> ,			<b>ks</b> th brokerage firms, mor	nev market accounts	
	■ No	oroo. Boria ranao	,	it accounts wi	ar brokerage mine, mer	io y mariot accounte	
	Yes		Ir	nstitution or is	suer name:		
		ublicly traded s venture	tock and in	nterests in in	corporated and uninc	orporated businesses, including an interest	t in an LLC, partnership, and
	No						
	J Yes.	Give specific in		bout them e of entity:		% of ownership:	
00	<b>.</b>			·		·	
	Negoti Non-ne	iable instruments	s include pe	rsonal check	s, cashiers' checks, pro	egotiable instruments missory notes, and money orders. by signing or delivering them.	
	No 1 Voc	Give specific inf	ormation at	out thom			
_	<b>1</b> 165.	Give specific ini		er name:			
		ment or pensior oles: Interests in			(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing p	olans
	Yes.	List each accou		ly. account:	lootitution r		
			Type of	account:	Institution r	name:	
					401(k) / R 100% exe	etirement plan through employer - empt.	\$10,000.00
_	Your s Examp	ty deposits and hare of all unuse oles: Agreement	ed deposits	you have ma	de so that you may con rent, public utilities (ele	tinue service or use from a company ctric, gas, water), telecommunications compan	ies, or others
	Your s <i>Examp</i> INo	hare of all unuse	ed deposits	you have ma	rent, public utilities (ele	tinue service or use from a company ctric, gas, water), telecommunications compan	ies, or others
23.	Your s Examp No Yes.  Annuit	share of all unuse oles: Agreement	ed deposits s with landlo	you have ma ords, prepaid	rent, public utilities (ele	ctric, gas, water), telecommunications compan	ies, or others
23.	Your s Examp No Yes.  Annuit No	share of all unused bles: Agreements 	ed deposits s with landlo or a periodi	you have ma ords, prepaid	rent, public utilities (ele Institution r money to you, either fo	ctric, gas, water), telecommunications compan	ies, or others
23. A	Your s Examp No Yes.  Annuit No Yes  Anterest 6 U.S.	share of all unuse oles: Agreements 	ed deposits s with landle or a periodi ssuer name on IRA, in	you have ma ords, prepaid c payment of and descripti an account i	rent, public utilities (ele- Institution r money to you, either fo on.	ctric, gas, water), telecommunications compan	
23. <i>I</i>	Your s Examp No Yes.  Annuit No Yes  telefolds  No No No No No	thare of all unused of less: Agreements  ies (A contract f  is ts in an educati C. §§ 530(b)(1),	or a periodi ssuer name on IRA, in 529A(b), ar	you have ma ords, prepaid c payment of and descripti an account ind 529(b)(1).	Institution removes to you, either for on.	ctric, gas, water), telecommunications companname or individual: r life or for a number of years)	gram.
23. 4 24. li 2 25.	Your s Examp No Yes.  Annuit No Yes No Yes No Yes Trusts,	thare of all unused of less: Agreements  ties (A contract for less in an educati C. §§ 530(b)(1),	or a periodication of a periodic	you have ma ords, prepaid c payment of and descripti an account i nd 529(b)(1).	Institution r money to you, either fo on. n a qualified ABLE pro	ctric, gas, water), telecommunications companiame or individual: r life or for a number of years) ogram, or under a qualified state tuition pro	gram.
23. <i>A</i> 24. li 2 25	Your s Examp No Yes.  Annuit No Yes  No Yes  Trusts,	thare of all unused of less: Agreements  ties (A contract for less in an educati C. §§ 530(b)(1),	or a periodicate on IRA, in a 529A(b), an astitution na	you have ma ords, prepaid c payment of and descripti an account i and 529(b)(1). Ime and descriptions	Institution r money to you, either fo on. n a qualified ABLE pro	ctric, gas, water), telecommunications companionate or individual:  r life or for a number of years)  ogram, or under a qualified state tuition pro	gram.
23. A S C C C C C C C C C C C C C C C C C C	Your s Examp No Yes. Annuit No Yes No Yes No Yes No Yes No Yes Frusts, No Yes Patents Examp	ties (A contract f  ts in an educati C. §§ 530(b)(1),  requitable or fu  Give specific in s, copyrights, ti	or a periodical successive successive name on IRA, in a 529A(b), an astitution nature interestruction a rademarks	you have ma ords, prepaid c payment of and descripti an account ind 529(b)(1). Ime and descriptions are and descriptions.	Institution romaney to you, either foon.  In a qualified ABLE proving the province of the prov	ctric, gas, water), telecommunications companiane or individual:  r life or for a number of years)  ogram, or under a qualified state tuition prome records of any interests.11 U.S.C. § 521(c):  ng listed in line 1), and rights or powers exe	gram.
23. A	Your s Examp No Yes. Annuit No Yes No	ties (A contract f  ts in an educati C. §§ 530(b)(1),  requitable or fu  Give specific in s, copyrights, ti	or a periodical seuer name inture interestitution names seuer	you have ma ords, prepaid c payment of and descripti an account i and 529(b)(1). Ime and desc ests in prope bout them , trade secre s, websites, pr	Institution romaney to you, either foon.  In a qualified ABLE proving the province of the prov	ctric, gas, water), telecommunications companionate or individual:  r life or for a number of years)  ogram, or under a qualified state tuition proper records of any interests.11 U.S.C. § 521(c):  og listed in line 1), and rights or powers execual property	gram.
23. A	Your s Examp No Yes. Annuit No Yes Licens	ties (A contract f  ties (A contract f  ts in an educati C. §§ 530(b)(1),  r, equitable or fu  Give specific in s, copyrights, to oles: Internet dor Give specific in es, franchises,	or a periodical successive the deposits in the successive representation of the successive the s	you have ma ords, prepaid c payment of and descripti an account i and 529(b)(1). Ime and desc ests in prope bout them , trade secre s, websites, prope bout them general intar	Institution round in the control of	ctric, gas, water), telecommunications companionate or individual:  r life or for a number of years)  ogram, or under a qualified state tuition proper records of any interests.11 U.S.C. § 521(c):  og listed in line 1), and rights or powers execual property	gram. rcisable for your benefit

Official Form 106A/B Schedule A/B: Property page 4

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debtor 1	Case 17-26163 Do	c 1 Filed 08/31/17 Document	Entered 08/31/17 Page 14 of 64 Case nu	10:17:37 Des	c Main
28. <b>Tax re</b>	efunds owed to you				
□ No	. Give specific information about th		advitilad the returns and the to		
■ res	. Give specific information about th	em, including whether you alre	ady filed the returns and the ta	x years	
		Estimated 2016 tax refure been received before on ordinary and necesses.	e filing and spent		\$0.00
■ No	y support nples: Past due or lump sum alimor . Give specific information	ny, spousal support, child supp	ort, maintenance, divorce settle	ement, property settlem	nent
Exam ■ No	amounts someone owes you nples: Unpaid wages, disability insubenefits; unpaid loans you make Give specific information	rance payments, disability ben lade to someone else	efits, sick pay, vacation pay, v	orkers' compensation,	Social Security
31. Interes	ests in insurance policies apples: Health, disability, or life insur	ance; health savings account (	HSA); credit, homeowner's, or	renter's insurance	
■ Yes	. Name the insurance company of Company r		Beneficiary:		Surrender or refund value:
		Insurance policy through - (No cash surrender val			\$0.00
		e insurance policy througl stern Mutual. (No cash r value)	1		\$0.00
If you some No	nterest in property that is due your are the beneficiary of a living trust cone has died.  Give specific information			$\prime$ entitled to receive pro	perty because
	as against third parties, whether on ples: Accidents, employment dispu			nent	
	. Describe each claim				
■ No	contingent and unliquidated cla	ims of every nature, includin	g counterclaims of the debto	r and rights to set off	claims
	inancial assets you did not alrea	dy list			
■ No □ Yes	. Give specific information				
	the dollar value of all of your en	tries from Part 4 including a	nv entries for pages vou hav	e attached	
	Part 4. Write that number here	•			\$11,246.00

Dalar	4	Case 17-26163	Doc 1	Filed 08/3 Docume		Entered 08 Page 15 of	8/31/17 10:17:37 64	Desc Main
Debto	or 1	Lisa Bolano Burns					Case number (if known)	
37. <b>Do</b>	you o	own or have any legal or equi	itable interest i	n any business-r	elated p	roperty?		
■ N	No. Go	to Part 6.						
ΠY	es. G	Go to line 38.						
Part 6:		scribe Any Farm- and Comme ou own or have an interest in fa			You Ow	n or Have an Interes	st In.	
46. <b>D</b> c	o vou	own or have any legal or	r equitable in	terest in anv fa	rm- or o	commercial fishin	a-related property?	
		Go to Part 7.	•	,			3 · · · · · · · · · · · · · · ·	
	☐ Yes.	. Go to line 47.						
Part 7:	:	Describe All Property You	Own or Have a	n Interest in Tha	t You Dic	d Not List Above		
<i>E.</i>	xamp No	have other property of an oles: Season tickets, country Give specific information	y club membe		list?			
54. <i>F</i>	Add tl	he dollar value of all of yo	our entries fro	om Part 7. Writ	e that n	umber here		\$0.00
Part 8:	:	List the Totals of Each Part	of this Form					
55. <b>F</b>	Part 1	: Total real estate, line 2						\$320,000.00
56. <b>F</b>	Part 2	2: Total vehicles, line 5				\$3,775.00		· ,
57. <b>F</b>	Part 3	3: Total personal and hou	sehold items	, line 15		\$5,750.00		
58. <b>F</b>	Part 4	l: Total financial assets, li	ine 36			\$11,246.00		
59. <b>F</b>	Part 5	i: Total business-related រុ	property, line	45		\$0.00		
60. <b>F</b>	Part 6	6: Total farm- and fishing-	related prope	erty, line 52		\$0.00		
61. <b>F</b>	Part 7	: Total other property not	t listed, line 5	54	+	\$0.00		
62. <b>T</b>	Total	personal property. Add lir	nes 56 througl	า 61		\$20,771.00	Copy personal property to	otal <b>\$20,771.0</b> 0

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$340,771.00

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170(.1111(.111 1 70(), 10 ()) 4
Fill in this information to identify your case:
Debtor 1 Lisa Bolano Burns
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number(if known)

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

to t	the applicable statutory amount.  It is identify the Property You Claim as E.		.y 13 c	intermined to exceed that amount	t, your exemption would be immed				
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.								
	■ You are claiming state and federal nonbank	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	☐ You are claiming federal exemptions. 11 U	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	834 Pheasant Walk Drive Schaumburg, IL 60193-3954 Cook County Debtor purchased her home in June 2016 for \$300,000.00. The home was appraised for \$310,000.00 at the time of purchase. Debtor estimates her home to be worth around \$300,000.00 to \$320,000.0 Line from Schedule A/B: 1.1	\$320,000.00		\$15,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901				
	2007 Saab 2.0T 97000 miles - Paid in Full - Full Coverage Auto Insurance Line from Schedule A/B: 3.1	\$3,775.00		\$2,400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)				
	Miscellaneous used household goods and furnishings 1 dining room set, 1 chair, 2 couches,	\$1,000.00	<b>■</b>	\$1,000.00 100% of fair market value, up to	735 ILCS 5/12-1001(b)				

any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$1,200.00

4 bedroom sets

Line from Schedule A/B: 6.1

Line from Schedule A/B: 7.1

\$1,200.00

4 T.Vs, 1 computer, 3 cell phones,

735 ILCS 5/12-1001(b)

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Lisa Bolano Burns			Case number (if known)	
	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
<del>-</del>	\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(a)
nom oshodalo 772. TTT			100% of fair market value, up to any applicable statutory limit	
_	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
	\$50.00	•	\$50.00	735 ILCS 5/12-1001(b)
Hom Generale FAB. 1911			100% of fair market value, up to any applicable statutory limit	
	\$1,121.00		\$1,121.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
nom osnodalo 702. TVIZ			100% of fair market value, up to any applicable statutory limit	
•	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
nom oshodalo 702. Trie			100% of fair market value, up to any applicable statutory limit	
	\$10,000.00		100%	735 ILCS 5/12-704
			100% of fair market value, up to any applicable statutory limit	
ject to adjustment on 4/01/19 and every No	3 years after that for ca	ases fi	,	,
No No				
	description of the property and line on edule A/B that lists this property  oks, Pictures, and CD's from Schedule A/B: 8.1  dering Apparel from Schedule A/B: 11.1  cellaneous Costume Jewelry from Schedule A/B: 12.1  ch on Hand from Schedule A/B: 16.1  ceking account with Bank of erica from Schedule A/B: 17.1  ceking account with PNC from Schedule A/B: 17.2  ceking account with BMO Harris from Schedule A/B: 17.3  ceking account with BMO Harris from Schedule A/B: 17.3  (k) / Retirement plan through olioyer - 100% exempt. from Schedule A/B: 21.1  you claiming a homestead exemption of specific to adjustment on 4/01/19 and every No  Yes. Did you acquire the property cover	Current value of the property and line on edule A/B that lists this property  Cuty the value of the protion you own Copy the value from Schedule A/B: 8.1  Copy the value from Schedule A/B: 8.1  Solution Schedule A/B: 8.1  Cellaneous Costume Jewelry from Schedule A/B: 11.1  Cellaneous Costume Jewelry from Schedule A/B: 12.1  Solution of the property should be solved from Schedule A/B: 16.1  Celking account with Bank of Prome Schedule A/B: 17.1  Celking account with PNC from Schedule A/B: 17.2  Celking account with BMO Harris from Schedule A/B: 17.3  Celking account with BMO Harris from Schedule A/B: 17.3  Celking account with BMO Harris from Schedule A/B: 17.3  Celking account with BMO Harris from Schedule A/B: 21.1  Celking account with BMO Harris from Schedule A/B: 21.1  Celking account with BMO Harris from Schedule A/B: 21.1  Celking account with BMO Harris from Schedule A/B: 21.1  Celking account with BMO Harris from Schedule A/B: 21.1	cellaneous Costume Jewelry from Schedule A/B: 11.1  cellaneous Costume Jewelry from Schedule A/B: 12.1  ch on Hand from Schedule A/B: 16.1  celting account with Bank of form Schedule A/B: 17.1  celting account with PNC from Schedule A/B: 17.2  celting account with BMO Harris from Schedule A/B: 17.3  celting account with BMO Harris from Schedule A/B: 17.3  celting account with BMO Harris from Schedule A/B: 17.3  celting account with BMO Harris from Schedule A/B: 17.3  celting account with BMO Harris from Schedule A/B: 21.1  celting account with BMO Harris from Schedule A/B: 21.1  celting account with BMO Harris from Schedule A/B: 21.1  celting account with BMO Harris from Schedule A/B: 21.1  celting account with BMO Harris from Schedule A/B: 21.1	Current value of the portion you own Copy the value from Schedule A/B that lists this property

Ca	se 17-26163	Doc 1 Filed 08/31/17  Document	/ Entered Page 18	1 08/31/17 10:1 of 64	L7:37 Desc N	lain
Fill in this inform	nation to identify you					
Debtor 1	Lisa Bolano Bu	rns				
200.01	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	: NORTHERN DISTRICT OF IL	LINOIS			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form	n 106D					
		Who Have Claims	Secured	by Property	/	12/15
		If two married people are filing togetl out, number the entries, and attach it				
• • •	have claims secured by	v vour property?				
	•	his form to the court with your othe	ur echadulas Voi	u have nothing else to	report on this form	
_		•	i scriedules. Tot	u nave nothing else to	report on this form.	
	all of the information	below.				
Part 1: List Al	II Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the cress a particular claim, list the other credito		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's nar		Do not deduct the	that supports this	portion
2.1 Pacific Un	nion Financia	Describe the property that secures	the claim:	value of collateral. <b>\$291,374.00</b>	s320,000.00	If any <b>\$0.00</b>
Creditor's Name		834 Pheasant Walk Drive		<del>+</del>		<del></del>
		Schaumburg, IL 60193-3954	4 Cook			
		County				
		Debtor purchased her home in June				
		•				
		her home to be worth arou				
1603 l hi F	Fwy Ste 500	\$300,000.				
		As of the date you file, the claim is	Check all that			
75234	,					
Number, Street.	. Citv. State & Zip Code	_				
, , , , , , , , , , , , , , , , , , , ,	, , ,	1				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or secu	ıred		
Debtor 2 only		car loan)				
☐ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the	he debtors and another	☐ Judgment lien from a lawsuit				
Check if this cla community del		Other (including a right to offset)	Mortgage			
	Opened					
	05/16 Last					
Date debt was incu	urred Active 08/17	Last 4 digits of account num	nber 7056			
Farmers E 75234  Number, Street,  Who owes the de  Debtor 1 only Debtor 2 only Debtor 1 and De At least one of th Check if this cla	ebtor 2 only he debtors and another aim relates to a bt  Opened 05/16 Last	Debtor purchased her home 2016 for \$300,000.00. The head was appraised for \$310,000 time of purchase. Debtor ether home to be worth arout \$300,000.  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)  Statutory lien (such as tax lien, mederally Judgment lien from a lawsuit) Other (including a right to offset)	home 0.00 at the estimates nd : Check all that  s mortgage or secu echanic's lien)  Mortgage	ured		

Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.

\$291,374.00

Write that number here:

\$291,374.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	Ous	0 17 20100   2	л <u>т</u> 000 г	Ocument Pa	ine 1	9 of 64	.01 000	o man
Fill in	this informa	ntion to identify your o						
Debto	or 1	Lisa Bolano Burns	s					
		First Name	Middle Nar	me Last	Name			
Debto	r 2 e if, filing)	First Name	Middle Nai	ma last	Name			
United	d States Bank	ruptcy Court for the:	NORTHERN	DISTRICT OF ILLINOIS	S			
Case	number							
(if know	n)							heck if this is an
							] aı	nended filing
Offic	ial Form	106E/F						
			ho Have	Unsecured Cla	ims			12/15
ny exe schedu schedu eft. Att	ecutory contra ile G: Executo ile D: Creditor ach the Contir and case numb	cts or unexpired leases ry Contracts and Unexpi s Who Have Claims Sect nuation Page to this pag er (if known).	that could resul ired Leases (Off ured by Property e. If you have no	It in a claim. Also list exe icial Form 106G). Do not y. If more space is needed o information to report in	cutory of include d, copy t	Part 2 for creditors with NON contracts on Schedule A/B: I any creditors with partially she Part you need, fill it out, do not file that Part. On the t	Property (Official secured claims number the ent	al Form 106A/B) and on that are listed in ries in the boxes on the
Part 1		of Your PRIORITY Un						
		s have priority unsecured	d claims against	t you?				
	No. Go to Par	t 2.						
	Yes.	of Your NONPRIORIT	V I I	Olaima.				
Part 2								
		have nonpriority unsec	_	-				
ш	No. You have	nothing to report in this pa	art. Submit this fo	orm to the court with your of	ther sche	edules.		
	Yes.							
un tha	secured claim,	list the creditor separately	for each claim. I	For each claim listed, identi	ify what t	holds each claim. If a credit ype of claim it is. Do not list cl three nonpriority unsecured c	aims already inc	uded in Part 1. If more
								Total claim
4.1		Brothers Behavioral	l Health_	Last 4 digits of account n	umber	9069		\$1,173.00
		Creditor's Name Salt Creek Lane	,	When was the debt incurr	red?	2016		
		Heights, IL 60005-		Trion was the dest moun		2010		
	Number Stre	et City State Zlp Code		As of the date you file, the	e claim i	s: Check all that apply		
	_	ed the debt? Check one.		_				
	■ Debtor 1 only □ Contingent							
	Debtor 2	-		Unliquidated				
	_	and Debtor 2 only		Disputed		1 -1-1		
		one of the debtors and and	All IGI	Type of NONPRIORITY ur □ Student loans	isecure	a Glafffi:		
	☐ Check if debt	this claim is for a comm	ilullity	_	nf a cono	ration agreement or divorce th	nat you did not	
		subject to offset?		report as priority claims	л а эвра	ranon agreement or divorce tr	iai you ulu liol	
	■ No		1	Debts to pension or prof	fit-sharin	g plans, and other similar deb	ts	
	☐ Yes			Other. Specify Medic	cal			
				. ,				

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Lisa Boiano Burns	Case number (# know)	
Alexian Brothers Medical Center	Last 4 digits of account number 3053	\$180.00
Nonpriority Creditor's Name Attn: PFS Correspondence Team 3040 W. Salt Creek Lane	When was the debt incurred? 2016	
Arlington Heights, IL 60005-1069  Number Street City State Zlp Code	As of the date vary file the plains in Observal, all that are by	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Amercred	Last 4 digits of account number NHENFK	\$830.00
Nonpriority Creditor's Name 400 West Lake Street Roselle, IL 60172	When was the debt incurred? Opened 2/08/17	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ <sub>No</sub>	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical	
American Credit Systems, Inc.	Last 4 digits of account number NHE/NFK	\$0.00
Nonpriority Creditor's Name 400 West Lake Street Suite 111	When was the debt incurred? 2016	
Schaumburg, IL 60193 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— 110	_ Notice Only-Collection for Patrick Kennelly	
□Yes	Other. Specify Phd. & Associates	

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Debtor 1 Lisa Bolano Burns Case number (if know) 4.5 \$952.00 Amex Last 4 digits of account number 5473 Nonpriority Creditor's Name Correspondence Opened 05/16 Last Active Po Box 981540 When was the debt incurred? 7/28/17 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Credit Card ☐ Yes 4.6 **ARS/Account Resolution Specialist** Last 4 digits of account number 8883 \$242.00 Nonpriority Creditor's Name Opened 4/20/17 Last Active Po Box 459079 When was the debt incurred? 02/16 Sunrise, FL 33345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Collection Attorney Mea - Elk Grove Llc Other, Specify 4.7 Atg Credit Llc Last 4 digits of account number 1443 \$106.00 Nonpriority Creditor's Name 1700 W Cortland St Opened 09/16 Last Active Ste 2 When was the debt incurred? 03/16 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Alexian Brother ☐ Yes

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Debtor 1 Lisa Bolano Burns 4.8 \$24.00 Atq Credit Llc Last 4 digits of account number 1446 Nonpriority Creditor's Name 1700 W Cortland St Opened 09/16 Last Active Ste 2 When was the debt incurred? 03/16 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Alexian Brother ☐ Yes Atg Credit Llc 4.9 Last 4 digits of account number 1445 \$37.00 Nonpriority Creditor's Name 1700 W Cortland St Opened 09/16 Last Active Ste 2 When was the debt incurred? 03/16 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Attorney Alexian Brother** 4.1 **Atg Credit LIc** \$175.00 1444 Last 4 digits of account number Nonpriority Creditor's Name 1700 W Cortland St Opened 09/16 Last Active Ste 2 When was the debt incurred? 03/16 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Attorney Alexian Brother** Other, Specify

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Lisa Boiano Burns		Case number (if know)	
Banfield Pet Hospital	Last 4 digits of account number	2553	\$168.00
Nonpriority Creditor's Name  1440 E Golf Rd	When was the debt incurred?	2016	
Schaumburg, IL 60173	when was the dest incurred.	2010	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other Specify Veterinaria		
Barclays Bank Delaware	Last 4 digits of account number	4832	\$3,237.00
Nonpriority Creditor's Name			**,=****
100 S West St Wilmington, DE 19801	When was the debt incurred?	Opened 06/16 Last Active 05/17	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	<u> </u>	
BZA Behavioral LLC	Last 4 digits of account number	6120	\$147.00
Nonpriority Creditor's Name 650 East Algonquin Rd.	When was the debt incurred?	09/2015 - 03/17	
Schaumburg, IL 60173-3853 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	, and just of the state of the		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other Specify Medical		

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Case number (if know) Debtor 1 Lisa Bolano Burns 4.1 Capital One 2480 \$4,976.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/12 Last Active Po Box 30253 When was the debt incurred? 07/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card Cardiovascular Associates at 4.1 1597 \$344.00 5 **ABHVI** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 02/2016 900 Frontage Road, Suite 325 Woodridge, IL 60517 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 CARY A LIND PC 2862 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 121 S WILKE #407 2003 When was the debt incurred? Arlington Heights, IL 60005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts broken lease notice only collecting for Stonebridge Other. Specify ☐ Yes

VIIIage/MANTEKS MANAGEMENT

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Debtor 1 Lisa Bolano Burns Case number (if know) 4.1 Cda/Pontiac 7186 \$84.00 Last 4 digits of account number Nonpriority Creditor's Name Attn:Bankruptcy **Opened 10/16** When was the debt incurred? Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Elk Grove Radiology ☐ Yes 4.1 **Chase Card** 1701 \$415.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 03/15 Last Active When was the debt incurred? Po Box 15298 7/10/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Chase Card** 8759 \$457.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 06/16 Last Active Attn: Correspondence Dept Po Box 15298 When was the debt incurred? 7/02/17 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor	1 Lisa Bolano Burns		Case number (if know)	
4.2	Chicago Cardiology Institute SC	Last 4 digits of account number	0806	\$902.00
0	Nonpriority Creditor's Name 75 Remittance Drive	When was the debt incurred?	Ψ002.00	
	Suite 1224	When was the dept incurred?	2016	
	Chicago, IL 60675-1224	=		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	_ ′	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
	Choice Recovery Inc	Last 4 digits of account number	7887	\$62.00
	Nonpriority Creditor's Name			• • • • • • • • • • • • • • • • • • • •
	1550 Old Henderson Rd Ste 100 Columbus, OH 43220	When was the debt incurred?	Opened 08/15 Last Active 12/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other, Specify Collection		
	Li Tes	Other. Specify		
4.2	Community Consolidated School		70.44	<b>\$75.00</b>
2	Nonpriority Creditor's Name	Last 4 digits of account number	7841	\$75.00
	Attn: Bankruptcy Dept. 580 N. First Bank Drive	When was the debt incurred?	2016	
	Palatine, IL 60067  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Collection		

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Debtor 1 Lisa Bolano Burns 4.2 \$437.00 Credit One Bank Na 4993 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 11/16 Last Active Po Box 98873 When was the debt incurred? 06/17 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.2 **Daily Herald** 1141 \$300.00 Last 4 digits of account number Nonpriority Creditor's Name **Paddock Publications** When was the debt incurred? 2015 PO Box 1420 Arlington Heights, IL 60006-1420 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify newspaper ☐ Yes 4.2 **Derick Dermatology** \$192.00 7684 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6685 When was the debt incurred? 2016 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other, Specify

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Debtor 1 Lisa Bolano Burns Case number (if know) 4.2 Elk Grove Dermatology \$97.00 issa Last 4 digits of account number 6 Nonpriority Creditor's Name 901 Biesterfield Rd When was the debt incurred? 2016 Suite 209 Elk Grove Village, IL 60007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.2 **Elk Grove Dermatology** ndon \$97.00 Last 4 digits of account number Nonpriority Creditor's Name 901 Biesterfield Rd 2016 When was the debt incurred? Suite 209 Elk Grove Village, IL 60007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.2 Elk Grove Village Public Library 0862 \$102.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1001 Wellington Ave When was the debt incurred? 2016 Elk Grove Village, IL 60007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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Debtor	1 Lisa Bolano Burns		Case number (if know)				
4.2 9	Enturion Services Corporation	Last 4 digits of account number	4407	\$0.00			
9	Nonpriority Creditor's Name 1040 S. Arlington Heoghts Rd. Suite 205	When was the debt incurred? 2016		ψυ.υυ			
	Arlington Heights, IL 60005  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	□Yes	■ Other. Specify Consolidat					
4.3	Fed Loan Servicing  Nonpriority Creditor's Name	Last 4 digits of account number	0014	\$171,627.00			
	Po Box 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 06/14 Last Active 7/31/17				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify					
		Educationa					
4.3 1	Malcolm S. Gerald & Assoc  Nonpriority Creditor's Name	Last 4 digits of account number	6473	\$0.00			
	Attn: Bankruptcy Dept. 332 S. Michigan Ave Suite 600	When was the debt incurred?	2016				
	Chicago, IL 60604  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	, i.e. o auto you, o	er chook an mar apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	· · ·				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify  Notice Only Medical Ce					

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Case number (if know)

4.3 \$180.00 **Merchants Credit** 1269 Last 4 digits of account number 2 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 10/16 Last Active Ste 700 When was the debt incurred? 03/16 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Midwest Orthopaedics** ☐ Yes Other. Specify At Rush L 4.3 \$0.00 Mira Med Revenue Group 2275 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr. When was the debt incurred? 2016 Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Notice Only-Collection for Alexian Brothers** ☐ Yes Other. Specify **Medical Center** 4.3 **NiCor** 1141 \$1,030.21 Last 4 digits of account number Nonpriority Creditor's Name Correspondence/Bankruptcy When was the debt incurred? 2016 PO Box 190 Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utility ☐ Yes

Debtor 1 Lisa Bolano Burns

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Debioi	Lisa Bolano Burns		Case number (if know)			
4.3	NorthShore University HealthSystem	Last 4 digits of account number	4239	\$388.00		
	Nonpriority Creditor's Name Hospital Billing 23056 Network Place	When was the debt incurred?	2016			
	Chicago, IL 60673  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Medical				
4.3	Northwest Radiology Associates,					
6	SC	Last 4 digits of account number	333G	\$13.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 520 E. 22nd St. Lombard, IL 60148	When was the debt incurred?	2017			
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin				
	Yes	Other. Specify Medical				
4.3	Patrick Kennelly Phd. & Associates  Nonpriority Creditor's Name	Last 4 digits of account number	NHE/NFK	\$830.00		
	1340 Remington Rd, Schaumburg, IL 60173	When was the debt incurred?	2016			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharin	a plans, and other similar debts			
	□ Yes	Other. Specify Collection	g p.a, and outer ourman dobto			
	<b>□</b> 1€9	Other. Specify				

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Case number (if know)

DCDIO	LISA BOIATIO BUITIS		Case Hamber (II know)			
4.3	Republic Services	Last 4 digits of account number	6675	\$17.00		
	Nonpriority Creditor's Name 2101 S Busse Rd	When was the debt incurred?	2016			
	Mount Prospect, IL 60056  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	iration agreement of divorce that you did not			
	■ No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Utility				
4.3	Rueda Pediatrics, SC	Last 4 digits of account number	495	\$181.00		
	Nonpriority Creditor's Name 1766 W. Algonquin Rd. Arlington Heights, IL 60005-3405	When was the debt incurred?	11/2016 - 5/2017			
	Number Street City State Zlp Code	As of the date you file, the claim				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	$\square$ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify Medical				
4.4	Syncb/home Design Sele  Nonpriority Creditor's Name	Last 4 digits of account number	4921	\$1,513.00		
	Po Box 96060 Orlando, FL 32896	When was the debt incurred?	Opened 05/16 Last Active 08/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Charge Acc	count			

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Debtor 1 Lisa Bolano Burns Case number (if know) 4.4 Synchrony Bank/Walmart 6327 \$568.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/16 Last Active Po Box 956060 When was the debt incurred? 06/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.4 System 2119 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 64437 2016 When was the debt incurred? Saint Paul, MN 55164-0437 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Notice Only-Collection for Banfield Pet ☐ Yes Other. Specify Hospital 4.4 **Target** 2989 \$1,391.00 Last 4 digits of account number Nonpriority Creditor's Name C/O Financial & Retail Srvs Opened 08/15 Last Active Mailstopn BT POB 9475 When was the debt incurred? 06/17 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

DODIC	LISA BOIATIO BUITIS		Case Humber (II know)			
4.4	Transworld Systems	Last 4 digits of account number	6535	\$0.00		
	Nonpriority Creditor's Name 507 Prudential Road Horsham, PA 19044	When was the debt incurred?	2016			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	•	,			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community ☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify Dermatalog	y-Collection for Elk Grove gy			
4.4 5	Transworld Systems	Last 4 digits of account number	6534	\$0.00		
	Nonpriority Creditor's Name 507 Prudential Road Horsham, PA 19044	When was the debt incurred?	2016			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	■ Other. Specify Dermatolog				
4.4	Unique National Collections	Last 4 digits of account number	2403	\$0.00		
	Nonpriority Creditor's Name 119 E. Maple St. Jeffersonville, IN 47130	When was the debt incurred?	2016			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	Notice Only Other. Specify Public Libr	y-Collection for Elk Grove Village arv			

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Debic	Lisa Bolano Burns		Case number (if know)			
4.4 7	Van Ru Credit Corporation	Last 4 digits of account number	9249	\$282.00		
	Nonpriority Creditor's Name 1350 E. Touhy Ave., Ste 300E	When was the debt incurred?	2016			
	Des Plaines, IL 60016  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharin				
	Yes	Other. Specify  Notice Only University	y-Collection for NorthShore HealthSystem			
4.4	Village of Elk Grove	Last 4 digits of account number	7015	\$122.00		
	Nonpriority Creditor's Name 901 Wellington Ave Elk Grove Village, IL 60007-3499	When was the debt incurred?	2016			
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharin				
	☐ Yes	Other. Specify Utility				
4.4	Wells Fargo Financia		0139	\$7,273.00		
9	Nonpriority Creditor's Name	Last 4 digits of account number		\$7,273.00		
	Po Box 94498 Las Vegas, NV 89193	When was the debt incurred?	Opened 06/16 Last Active 07/17			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	Other Specify Charge Acc	count			

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Lisa Bolano Burns

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 171,627.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 29,599.21
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 201,226.21

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			III FAUE 37 ULU4	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Lisa Bolano Burr	ns		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				Charlett this is an
(II KHOWH)				☐ Check if this is an amended filing

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	Jity		Ciaio		

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		Docume	ent Page 38 d	or 64	
Fill in this	information to identify your				
Debtor 1	Lisa Bolano Burr	ıs			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	per				
(if known)					Check if this is an amended filing
					amended lilling
Official	l Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
ill it out, ar		boxes on the left. Attach	the Additional Page t		needed, copy the Additional Page, p of any Additional Pages, write
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana				ty states and territories include
■ No.	Go to line 3.				
	. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	AP
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	ne
-	Number Street			<u>—</u>	
(	City	State	ZIP Code		
				Полива	
3.2	Name			_ ☐ Schedule D, lir ☐ Schedule E/F,	<del></del>
				☐ Schedule E/F,	
-	Number Street			—	
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:							
	otor 1 Lisa Bolano								
	otor 2								
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number 		-					•	chapter
0	fficial Form 106I					MM / DD/ Y		ig date.	
	chedule I: Your Inc	ome				ו /טט / ווווווו	111		12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your i ith you, do not inclu	spouse i de infor	is living mation	g with you, incl about your spo	ude information ouse. If more sp	n about p pace is r	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing s	pouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Empl	☐ Employed		
		Employment status	□ Not employed			☐ Not e	mployed		
	employers.	Occupation	Human Resource	es					
	Include part-time, seasonal, or self-employed work.	Employer's name	Schmolz + Bick INC	enbach	USA				
	Occupation may include student or homemaker, if it applies.	Employer's address	365 Village Dr. Carol Stream, IL 60188						
		How long employed the	here? 1 Year						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to r	eport for	any lin	e, write \$0 in the	space. Include	your non	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	employe	ers for that perso	on on the lines be	elow. If y	ou need
					F	or Debtor 1	For Debtor 2 non-filing sp		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	7,204.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	7,204.00	\$	N/A_	

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Deb	tor 1	Lisa Bolano Burns	-	Case	e number ( <i>if know</i>	n)				
					r Debtor 1		non	Debtor 2 o -filing spou	use	
	Cop	y line 4 here	4.	\$_	7,204.0	0	\$		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	1,139.0	0	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		0.0		\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	432.0	0	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.		0.0		\$		N/A	
	5e.	Insurance	5e.		428.0	_	\$		N/A	
	5f.	Domestic support obligations	5f.	\$_	0.0	_	\$_		N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.		0.0		*_ + \$		N/A N/A	
6		· · · · · · · · · · · · · · · · · · ·	_	.'Ψ_ \$		_	· : —			
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	· –	1,999.0		\$_		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	5,205.0	0	\$		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		0.0	_	\$_		N/A	
	8b.	Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent	8b.	. \$_	0.0	0	\$		N/A	
	8c.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.0	0	\$		N/A	
	8d.	Unemployment compensation	8d.	. \$	0.0	_	\$		N/A	
	8e.	Social Security	8e.	. \$	0.0		\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$_	0.0		\$		N/A	
	8g.	Pension or retirement income	8g.	_	0.0		\$_		N/A	
	8h.	Other monthly income. Specify:	8h.	.+ \$_	0.0	0	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.0	0	\$		N/A	
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$	5,205.00 +	\$		N/A =	\$	5,205.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —	0,200.00	· -			· —	0,200.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					Schedule J. 11. +	B	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12. \$	mbin	5,205.00 ed
			_							income
13.	Do y	you expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	?							

Official Form 106I Schedule I: Your Income page 2

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	in this information to identify your case:				
Deb	otor 1 Lisa Bolano Burns		Chec	ck if this is:	
			_	An amended filing	
	otor 2 ouse, if filing)			A supplement show 13 expenses as of	ving postpetition chapter
(Opt	ouse, it ming)			10 expenses as or	the following date.
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF IL	LINOIS	-	MM / DD / YYYY	
1	se number				
Of	fficial Form 106J		J		
	chedule J: Your Expenses				12/1
	as complete and accurate as possible. If two married people	lo aro filing togothor, b	oth are equ	ally responsible fo	
info	ormation. If more space is needed, attach another sheet to t mber (if known). Answer every question.				
Par	rt 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	<u> </u>				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Exper</i>	neae for Sanarata House	ahold of Dob	tor 2	
	Tes. Debiol 2 must me Official Form 1005-2, Exper	ises ioi separate nouse	eriola di Deb	101 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information f each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		11	■ Yes
					□ No
		Son		13	■ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than your dependents?				
	yourself and your dependents?				
Par	rt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unle penses as of a date after the bankruptcy is filed. If this is a s plicable date.				
Incl	lude expenses paid for with non-cash government assistan	ice if you know			
	e value of such assistance and have included it on <i>Schedule</i>				
(Off	ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	ce. Include first mortgag	e 4. \$		2,243.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	;	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	·	35.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5	Additional mortgage payments for your residence, such as	e home equity loans	5 \$		0.00

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tor 1 Lisa Bolano Burns	Case number (if known)	
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	300.00
6b. Water, sewer, garbage collection	6b. \$	100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	530.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	850.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	100.00
Personal care products and services	10. \$	85.00
Medical and dental expenses	11. \$	240.00
<b>Transportation.</b> Include gas, maintenance, bus or train fare.	·	
Do not include car payments.	12. \$	160.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	18.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20		
15a. Life insurance	15a. \$	56.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	97.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or	20.	
Specify:	16. \$	0.00
Installment or lease payments:		_
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: Student Loans		368.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not r		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official For		
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form or		0.00
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify:	21. +\$	0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$ 5.18	32.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form		
		22.02
22c. Add line 22a and 22b. The result is your monthly expenses.	φ <b>5,1</b> 6	32.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <b>5</b>	,205.00
23b. Copy your monthly expenses from line 22c above.	·	182.00
	·	,
23c. Subtract your monthly expenses from your monthly income.		00.00
The result is your monthly net income.	23c. <b>\$</b>	23.00
Do you expect an increase or decrease in your expenses within the year For example, do you expect to finish paying for your car loan within the year or do you emodification to the terms of your mortgage?		because (

Explain here: Effective September 1st 2017 debtor's mortgage payment changes from \$2064.00 to \$2243.00

■ No.

☐ Yes.

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Fill in this infor	mation to identify your	case:			
Debtor 1	Lisa Bolano Burn	S			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Forr <b>Declarat</b>		n Individual	Debtor's Scl	hedules	12/15
You must file thi obtaining money	s form whenever you file or property by fraud in	le bankruptcy schedules n connection with a bank		Making a false staten	nent, concealing property, or , or imprisonment for up to 20
	8 U.S.C. §§ 152, 1341, 1 n Below	519, and 3571.			
Did you pa	y or agree to pay some	one who is NOT an attori	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sumr	mary and schedules filed	I with this declaration	and
X /s/ Lisa	a Bolano Burns		X		
Lisa B	olano Burns		Signature of D	Debtor 2	

Date

Signature of Debtor 1

Date August 30, 2017

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	in this inform								
		nation to identify you							
Deb	tor 1	Lisa Bolano Bur	Middle Name	Last Name					
	tor 2 use if, filing)	First Name	Middle Name	Last Name					
` '		nkruptcy Court for the:	NORTHERN DISTRICT (						
Office	eu States Dai	initiapitely Court for the.	NORTHERN DISTRICT	OI ILLIIVOIO					
Case (if kno	e number					☐ Check if the camended			
	icial Fo		Affairs for Indivi	duals Filing fo	r Bankruptcy		4/10		
infor	mation. If m ber (if knowr	ore space is needed, n). Answer every que	ble. If two married people a attach a separate sheet to stion. Irital Status and Where You	this form. On the top of	are equally responsibl f any additional pages,	e for supplying o write your name	orrect and case		
				Lived Belore					
1.	wnat is youi	r current marital statu	IS?						
	<ul><li>■ Married</li><li>■ Not mar</li></ul>	ried							
2			lived enverbage other than	where you live new?					
2.	Ouring the last 3 years, have you lived anywhere other than where you live now?								
	□ No ■ Voc. Lie	t all of the places you l	ived in the last 3 years. Do n	ot include where you live	now				
		, ,	ŕ	ŕ					
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prio	r Address:		s Debtor 2 there		
	913 Ridge Elk Grove	Ct. Village, IL 60007	From-To: <b>04/2012-06/2</b> 0	☐ Same as Del	otor 1	☐ Sa From-	ime as Debtor 1 To:		
	s and territori	es include Arizona, Ca	ver live with a spouse or legilifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puer					
Part	2 Explai	n the Sources of You	r Income						
	Fill in the tota	al amount of income yo	nployment or from operatir u received from all jobs and have income that you receiv	all businesses, including	part-time activities.	ous calendar yea	ars?		
	Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions are exclusions)	Sources of incon Check all that app	oly. (befo	ss income ore deductions exclusions)		
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$49,844.0	DO ☐ Wages, commi bonuses, tips	ssions,			
			☐ Operating a business		☐ Operating a bu	siness			

Official Form 107

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Case number (if known) Document

Debtor 1 Lisa Bolano Burns

	5.14		D.L.	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$78,120.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$71,094.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year: (January 1 to December 31, 2014)	■ Wages, commissions, bonuses, tips	\$76,760.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
List each source and the gross inc  ☐ No ☐ Yes. Fill in the details.	Debtor 1	,	Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	IRA Distribution	\$1,554.00		
	Pension Income	\$6,180.00		
For the calendar year before that: (January 1 to December 31, 2015)	Pension Income	\$1,710.00		
Part 3: List Certain Payments You	Made Before You Filed for	Bankruptcy		
6. Are either Debtor 1's or Debtor 2  ☐ No. Neither Debtor 1 nor I individual primarily for a	2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	umer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
	ore you filed for bankruptcy, di		of \$6,425* or more?	
☐ No. Go to line				
☐ Yes List below paid that c	each creditor to whom you pai reditor. Do not include paymen	nts for domestic support oblig		
	e payments to an attorney for the ton 4/01/19 and every 3 year		or after the date of adjustment	t.

Case 17-26163 Doc 1 Filed 08/31/17 Entered 08/31/17 10:17:37 Document Page 46 of 64 Debtor 1 ase number (if known) Lisa Bolano Burns Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment** Total amount Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you Insider's Name and Address Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes

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Debtor 1 Lisa Bolano Burns

Par	t 5: List Certain Gifts and Contributions	s							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No								
	Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankru	uptcy,	did you give any gifts or contributions with a total	I value of more than	\$600 to any charity?				
	■ No								
	☐ Yes. Fill in the details for each gift or co	ontribu	tion.						
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankrup or gambling?  ■ No □ Yes. Fill in the details.	otcy o	r since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,				
	Describe the property you lost and	Descr	ribe any insurance coverage for the loss	Date of your	Value of property				
	how the loss occurred	Includ	e the amount that insurance has paid. List pending ince claims on line 33 of Schedule A/B: Property.	loss	lost				
Par	t 7: List Certain Payments or Transfers	i							
16.	consulted about seeking bankruptcy or p	repari	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		erty to anyone you				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid		Description and value of any property	Date payment	Amount of				
	Address		transferred	or transfer was	payment				
	Email or website address Person Who Made the Payment, if Not Y	ou		made	1.7				
	Law Offices of Joseph P. Doyle 105 S. Roselle Rd. Suite 203		\$1,050.00	2017	\$0.00				
	Schaumburg, IL 60193 Friend Aaron Danielson								
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	litors o		or transfer any prope	erty to anyone who				
	■ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

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Case number (if known) Document Debtor 1 Lisa Bolano Burns

18.	Within 2 years before you filed for bankrul transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alreading to the course of the course	ffairs? s the granting of a sec					
	Yes. Fill in the details.  Person Who Received Transfer  Address	Description and property transfe		Describe any property or payments received or debts paid in exchange	Date transfer was made		
	Person's relationship to you			F9-			
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p		any property to a self	f-settled trust or similar devic	e of which you are a		
	Yes. Fill in the details.						
	Name of trust	Description and	value of the propert	y transferred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, I	nstruments Safe Denos	sit Boyes and Storag	na linite			
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass No  Yes. Fill in the details.	or other financial acco	unts; certificates of o	•	•		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
	Chase Bank P.O. Box 659732 San Antonio, TX 78265	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	07-08/2017	\$311.87		
	Chase Bank PO Box 15298 Wilmington, DE 19850	xxxx-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	07-08/2017	\$240.63		
	Chase Bank PO Box 15298 Wilmington, DE 19850	XXXX-	☐ Checking ■ Savings ☐ Money Market ☐ Brokerage ☐ Other	07-08/2017	\$262.18		
	Capital One 360	XXXX-	☐ Checking ■ Savings ☐ Money Market ☐ Brokerage ☐ Other	Debtor closed her savings account with Capital One 360 in July 2017	\$0.00		

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Debtor 1 Lisa Bolano Burns

21.	cash, or other valuables?					
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?		
22.	Have you stored property in a storage unit or p	·	year before you filed for bankruptcy	?		
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?		
Par	19: Identify Property You Hold or Control for	Someone Else				
23.	23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	□ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
	Brandon Burns	PNC Checking Account	Son's student checking account. Client is on that account for custodial purposes only because son is a minor.	\$280.00		
Par	10: Give Details About Environmental Inform	nation				
	the purpose of Part 10, the following definitions					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, ground				
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.					
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.			
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	No No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	y release of hazardous material?				
	■ No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
		•				

Case 17-26163 Doc 1 Filed 08/31/17 Entered 08/31/17 10:17:37 Page 50 of 64 Document ase number (if known) Debtor 1 Lisa Bolano Burns 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Lisa Bolano Burns Lisa Bolano Burns Signature of Debtor 2 Signature of Debtor 1 Date August 30, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Fill in this inform	ation to identify your c	ase:		
Debtor 1	Lisa Bolano Burns			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DIST	TRICT OF ILLINOIS	
Case number				
(II KNOWN)				☐ Check if this is an amended filing
Official For	m 108			
Statemen	t of Intention	n for Indiv	riduals Filing Under Chap	oter 7 12/15
■ creditors have ■ you have lease You must file this	er is earlier, unless the	ir property, or nd the lease has no thin 30 days after		
	ople are filing together I date the form.	in a joint case, bo	th are equally responsible for supplying corre	ct information. Both debtors must
	nd accurate as possibl ur name and case num		needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims		
•	-	rt 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
information bel Identify the cree	ow. ditor and the property th	at is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
Creditor's <b>Pa</b>	cific Union Financia	ı	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
property	834 Pheasant Walk Schaumburg, IL 60 Cook County		<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	■ Yes
securing debt:	Debtor purchased June 2016 for \$300 home was appraise \$310,000.00 at the	,000.00. The ed for		
	purchase. Debtor of home to be worth a \$300,000.	estimates her		
For any unexpired in the information	below. Do not list real	se that you listed l estate leases. Un	in Schedule G: Executory Contracts and Unex expired leases are leases that are still in effect the trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
Describe your un	expired personal prop	erty leases		Will the lease be assumed?
Lessor's name:				□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Lisa Bolano Burns	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about	any property of my estate that secures a debt and any personal
property that is subject to an unexpired lease.	
X /s/ Lisa Bolano Burns X	Cimatura of Dahton O
Lisa Bolano Burns Signature of Debtor 1	Signature of Debtor 2
Date August 30, 2017 Date	e

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-26163 Doc 1 Filed 08/31/17 Entered 08/31/17 10:17:37 Desc Main Document Page 57 of 64

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In re	Lisa Bolano Burns		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF CO	MPENSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. ompensation paid to me within one year before e rendered on behalf of the debtor(s) in contemp	the filing of the petition in bankruptcy, o	r agreed to be paid	to me, for services render	red or to
	For legal services, I have agreed to accept		\$	1,050.00	
	Prior to the filing of this statement I have re	ceived	\$	1,050.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was:				
	☐ Debtor ☐ Other (specify):	Friend Aaron Danielson			
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. <b>I</b>	I have not agreed to share the above-disclose	ed compensation with any other person un	nless they are mem	pers and associates of my	law firm.
[	☐ I have agreed to share the above-disclosed cocopy of the agreement, together with a list of				irm. A
5. I	n return for the above-disclosed fee, I have agree	eed to render legal service for all aspects	of the bankruptcy c	ase, including:	
b c	<ul> <li>Analysis of the debtor's financial situation, ar</li> <li>Preparation and filing of any petition, schedu</li> <li>Representation of the debtor at the meeting of [Other provisions as needed]</li> <li>Negotiations with secured creditor reaffirmation agreements and app 522(f)(2)(A) for avoidance of liens</li> </ul>	les, statement of affairs and plan which r f creditors and confirmation hearing, and ors to reduce to market value; exen plications as needed; preparation a	nay be required; any adjourned hea nption planning;	rings thereof;	g of
б. В	By agreement with the debtor(s), the above-discles Representation of the debtors in a any other adversary proceeding.	osed fee does not include the following s any dischargeability actions, judici		es, relief from stay ac	tions or
		CERTIFICATION			
	certify that the foregoing is a complete statement ankruptcy proceeding.	nt of any agreement or arrangement for p	payment to me for re	epresentation of the debto	or(s) in
Αι	ugust 30, 2017	/s/ Joseph P. Doyle	Э		
Do	nte	Joseph P. Doyle 62 Signature of Attorney			
		Law Office of Jose	ph P. Doyle LLC		
		105 S. Roselle Roa	d, Suite 203		
		Schaumburg, IL 60 847-985-1100 Fax			
		joe@fightbills.com			-
		Name of law firm			

Case 17-26163 Doc 1 Filed 08/31/17 Entered 08/31/17 10:17:37 Desc Main BARKRUPTCYEONTRACT (Effective Aug. 1, 2015) NON-DISCHARGEABLE SECURED DEBTS Tax Mortgage Arrears Student Loans \_\_\_ Mortgage Balance \_ Gov't. Fines \_\_ Car Balance \_\_ Child Support \_\_\_ Car #2 Balance **←**?→\_ Loans TOTAL TOTAL TOTAL UNSECURED'S NON-DISCH. \$ SECURED'S Chapter 7 - eliminates dischargeable unsecured debts. Certain debts may not be dischargeable. \_\_ as your retainer on our total attorney's fee of \$ <u>ලර වට</u> in four (4) installments of \_\_\_\_\_\_\_ before 2) Today you paid us \$\_\_\_\_\_ as your retainer on our total attorney's fee of \$\_\_\_\_\_ You agree to pay \_\_\_ more prior to your case being filed. Client agrees that \$335.00 filing fee is a separate cost and is not included in the agreed legal fee. Client agrees that the \$40.00 fee for the credit report (per person) is a separate cost and is not included in the agreed legal fee. Client agrees that (1) TIMELY PAYMENT - Client will pay in full prior to the last payment date; 2) REFUNDS - If client decides to discontinue legal services at any time, client is only entitled to a refund or unearned fees. Firm will take about 30 days to do an accounting and issue a refund check. Firm's hourly rate is \$250 per hour for purposes of determining what refund client is entitled to in the event that client discharges Firm as client's attorney. In order to discharge Firm, client must submit a written request. 3) COLLECTIONS - Client agrees that if Firm is unable to collect its fees through the terms stated in this contract, Firm will be forced to refer your account to collections. Client is liable for all attorney's fees and costs incurred to collect the debt, including court costs, which will amount to no less than \$400.00. 4) LAW CHANGES - Firm's advice to client is subject to changes in applicable State and Federal laws. Client agrees to hold Firm harmless for damages related to changes in the law that affect client's ability to qualify for bankruptcy relief or to discharge debts within a bankruptcy case. The law may change any day and Firm is not responsible for any delay. Pay in full immediately so Firm can get client's case filed or risk that changes in laws or court decisions will change the advice we give client. 5) RESCISSIONS - Once client reaffirms a debt, client may only rescind the reaffirmation agreement by sending a written request, certified mail, return receipt requested, to Firm no less than two weeks prior to the bar date for rescissions. 6) STATE LAW PROCEEDINGS - Client has been advised by Firm that Firm will not represent client in ANY state law matter, including, but not limited to, divorce proceedings, civil lawsuits, or contempt proceedings. Client is hereby advised to appear at any and all state court proceedings, unless specifically advised otherwise in writing. 7) ADDITIONAL FEES - Client will be charged, and agrees to pay, additional fees for a) Failing to list debts by the time of filing that later have to be added to client's bankruptcy documents. The court charges \$30 to amend a petition. b) Missing court date. Client must attend a meeting of creditors approximately four weeks after client's case is filed. Firm still has to appear even if client does not, so Firm charges \$150 additional fee for any missed court date. Client agrees to call Firm three weeks after client's case has been filed to obtain the section 341 meeting date if client has not received notice of the meeting. c) Adversary objections to discharge based on fraudulent use on credit cards or other discharge issues. Firm's fee for negotiating a settlement is approximately \$300 to be paid in advance of settlement. Firm's fee for litigating a discharge issue is \$200 per hour, ten hours to be paid in advance. d) Delays - If client delays in paying the fees, returning the petition or in providing information to Firm, including appraisals, titles, bank account information. Firm reserves the right to charge additional fees which will amount to no less than \$100. e) Lien avoidance - Client agrees that the above quote fee does

that it is a Federal crime to omit a creditor or other information from a bankruptcy petition.

X DATE RECORD # 6239 X

not include services provided to avoid judgment liens (\$250) \_\_\_\_\_\_, non-purchase money security interests (\$200)

agrees that if client does not pay the fee the firm will not bring the motion and the lien will survive the bankruptcy. f) Bounced checks - Client agrees to pay a \$25 bounced check fee for any checks not honored by client's bank. 8) FULL DISCLOSURE - Client agrees to fully disclose all financial information to Firm. Client agrees to disclose all of assets and debts and understands

, or redemptions on vehicles (\$650) \_\_\_\_\_ to be paid prior to Firm drafting the motion. Client understands and

No part of this contract is meant to conflict with any part of the Court-Approved Retention Agreement, revised as of March 15, 2011, by the United States Bankruptcy Court for the Northern District of Illinois, and in any real or perceived conflict, the Provision of the Court-Approved Retention Agreement prevails.

## United States Bankruptcy Court Northern District of Illinois

In re	Lisa Bolano Burns		Case No.	
		Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	44
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and c	correct to the best of my

Alexian Brothers Behavioral Health 3040 W. Salt Creek Lane Arlington Heights, IL 60005-1069

Alexian Brothers Medical Center Attn: PFS Correspondence Team 3040 W. Salt Creek Lane Arlington Heights, IL 60005-1069

Amercred 400 West Lake Street Roselle, IL 60172

American Credit Systems, Inc. 400 West Lake Street Suite 111 Schaumburg, IL 60193

Amex Correspondence Po Box 981540 El Paso, TX 79998

ARS/Account Resolution Specialist Po Box 459079 Sunrise, FL 33345

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Banfield Pet Hospital 1440 E Golf Rd Schaumburg, IL 60173

Barclays Bank Delaware 100 S West St Wilmington, DE 19801

BZA Behavioral LLC 650 East Algonquin Rd. Schaumburg, IL 60173-3853 Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Cardiovascular Associates at ABHVI 900 Frontage Road, Suite 325 Woodridge, IL 60517

CARY A LIND PC 121 S WILKE #407 Arlington Heights, IL 60005

Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chicago Cardiology Institute SC 75 Remittance Drive Suite 1224 Chicago, IL 60675-1224

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columbus, OH 43220

Community Consolidated School Dist. Attn: Bankruptcy Dept. 580 N. First Bank Drive Palatine, IL 60067

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Daily Herald Paddock Publications PO Box 1420 Arlington Heights, IL 60006-1420 Derick Dermatology PO Box 6685 Carol Stream, IL 60197

Elk Grove Dermatology 901 Biesterfield Rd Suite 209 Elk Grove Village, IL 60007

Elk Grove Village Public Library 1001 Wellington Ave Elk Grove Village, IL 60007

Enturion Services Corporation 1040 S. Arlington Heoghts Rd. Suite 205 Arlington Heights, IL 60005

Fed Loan Servicing Po Box 60610 Harrisburg, PA 17106

Malcolm S. Gerald & Assoc Attn: Bankruptcy Dept. 332 S. Michigan Ave Suite 600 Chicago, IL 60604

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Mira Med Revenue Group 991 Oak Creek Dr. Lombard, IL 60148

NiCor Correspondence/Bankruptcy PO Box 190 Aurora, IL 60507

NorthShore University HealthSystem Hospital Billing 23056 Network Place Chicago, IL 60673

Northwest Radiology Associates, SC Attn: Bankruptcy Dept. 520 E. 22nd St. Lombard, IL 60148

Pacific Union Financia 1603 Lbj Fwy Ste 500 Farmers Branch, TX 75234

Patrick Kennelly Phd. & Associates 1340 Remington Rd, Schaumburg, IL 60173

Republic Services 2101 S Busse Rd Mount Prospect, IL 60056

Rueda Pediatrics, SC 1766 W. Algonquin Rd. Arlington Heights, IL 60005-3405

Syncb/home Design Sele Po Box 96060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

System P.O. Box 64437 Saint Paul, MN 55164-0437

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

Transworld Systems 507 Prudential Road Horsham, PA 19044

Unique National Collections 119 E. Maple St. Jeffersonville, IN 47130

Van Ru Credit Corporation 1350 E. Touhy Ave., Ste 300E Des Plaines, IL 60016

Village of Elk Grove 901 Wellington Ave Elk Grove Village, IL 60007-3499

Wells Fargo Financia Po Box 94498 Las Vegas, NV 89193